



Utility Discount Program Landlord Tenant Form

I authorize my landlord/manager to release my rental information below.		Primary Contact:	
		Signature:	
PROPERTY OWNER OR AUTHORIZED MANAGER: Complete all sections below with only the information you know to be true. Write "unknown" to questions you can't answer. (Do not leave any box blank.)			
1. STREET ADDRESS APARTMENT (APT) NUMBER		5. NAMES OF ALL ADULTS AND CHILDREN LIVING AT THIS ADDRESS	
CITY	STATE	ZIP CODE	
2. TENANT'S NAME			
3. DATE MOVED IN	4. TYPE OF RESIDENCE House <input type="checkbox"/> Apt <input type="checkbox"/> Duplex/Triplex <input type="checkbox"/> Condo <input type="checkbox"/> Mobile Home <input type="checkbox"/>	Attach more pages if needed.	
6. TOTAL RENT AMOUNT \$ _____	7. NAME OF PERSON(S) PAYING THE RENT		
PLEASE ANSWER THE FOLLOWING QUESTIONS:			
8. Is the rent subsidized <input type="checkbox"/> Yes <input type="checkbox"/> NO If yes (check all applicable boxes below): <input type="checkbox"/> Seattle Housing Authority <input type="checkbox"/> King County Housing Authority <input type="checkbox"/> HUD <input type="checkbox"/> Section 8 <input type="checkbox"/> Shelter+Care <input type="checkbox"/> Senior Bond Housing no Section 8 <input type="checkbox"/> Minimum Rent-Public Housing <input type="checkbox"/> Tax Credit <input type="checkbox"/> Housing First <input type="checkbox"/> HEN Program <input type="checkbox"/> OTHER FUNDING _____			
9. Does the tenant receive <u>any form</u> of deduction from the GROSS rent for a utility allowance, deduction or utility credit <input type="checkbox"/> Yes <input type="checkbox"/> No			
10. Does the tenant pay only a portion of the amount in box 6? <input type="checkbox"/> No <input type="checkbox"/> Yes, amount _____ If yes, who pays the additional rent _____			
11. Does the tenant work for a portion of the amount in box 6? <input type="checkbox"/> No <input type="checkbox"/> Yes, amount: \$ _____			
12. LANDLORD/MANAGER'S NAME		13. Property Owner's Name (If different from Landlord/Manager)	
STREET ADDRESS OR PO BOX NUMBER		OWNER'S NAME	
CITY	STATE	ZIP CODE	
CONTACTS : PHONE NUMBER:		CITY	
E-MAIL ADDRESS:		STATE	
LANDLORD/MANAGER SIGNATURE		DATE	
		WORK TELEPHONE NUMBER	

Seattle Human Services Department • Utility Discount Program

810 3rd Ave Suite 350, Seattle, Washington 98104 • Tel: (206) 684-0268 • Fax: (206) 621-5012 • Fax: (206) 621-5012